PTO/SB/17 (10-08)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				A li- a li - Ni	T 4	plete if Known 10/518,812-Conf. #3611		
				, application realise.		October 11, 2005		
FEE TRANSMITTAL				Timing Date		<u> </u>	<u>'</u>	
For FY 2009						SMOORENBURG. Guido F. HOLMES, Rex R.		
Applicant claims small entity status. See 37 CFR 1.27						3762		
				7 (11 01 (11)		22409-00281-US		
TOTAL AMOUNT OF PAYMENT		(\$) 0.00		Attorney Docket No. 22		.2409-00281-03		
METHOD OF	PAYMENT (check	all that apply)						
Check	Credit Card	Money Order	No	ne Other (please identify):		
Deposit Ac	count Deposit Account	Number: 22-	0185	Deposit a	Account Name:	Connolly Bov	e Lodge 8	k Hutz LLP
For the	above-identified depo	osit account, the D	irector is	s hereby authorize	ed to: (check	k all that apply)		
c	harge fee(s) indicated	below		Charg	e fee(s) indi	cated below, ex	cept for t	he filing fee
	harge any additional t ee(s) under 37 CFR 1.		ments o	f x Credit	any overpa	yments		
FEE CALCU	LATION							
1. BASIC FILIN	IG, SEARCH, AND E							
	FI	LING FEES	SE	ARCH FEES	EXAMIN	ATION FEES		
Application T	vpe Fee (\$	Small Entity) Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)
Utility	330	165	540	-	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CL	AIM FEES							Small Entity
Fee Description Feet alaim even 20 (including Paigrage)							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							52	26
Each independent claim over 3 (including Reissues) Multiple dependent claims							220 390	110 195
l · ·				ee Paid (\$)	Mi	ultinle Denend		
Total Claims -20 or HP x Fee (\$)						Multiple Dependent Claims ee (\$) Fee Paid (\$)		
HP = highest num	nber of total claims paid for							-
Indep. Claims	Extra Claim	Fee (\$)	F	ee Paid (\$)				
	- 3 or HP =	_ x =						
HP = highest num	nber of independent claims	paid for, if greater tha	n 3.					
3. APPLICATIO		rand 100 charts	-f	(avaludina alaatu	onically, file	.d		
	ation and drawings extends and drawings extends are sent and drawings and are sent and are sent and are sent and are sent are sen							0
	raction thereof. See 3					,,		•
Total Shee	ts <u>Extra Sheet</u>	s Number	of each a	additional 50 or frac	tion thereof	Fee (\$)	<u>Fee</u>	Paid (\$)
	100 =	/50 =		(round up to a who	ole number) >	·	=	
4. OTHER FEE(S)							<u>Fees</u>	Paid (\$)
	a Specification, \$13	,	tity disc	ount)				
Other (e.g.,	late filing surcharge)	:						
SUBMITTED BY								
Signature	/Michael G. Verga/			Registration No. (Attorney/Agent)	39,410	Telephone	(202) 33	1-7111
Name (Print/Type)	Michael G. Verga			Date	August 5	5, 2010		
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